

Telepathic Connections between Intimate Partners
Principal Investigator: Tehani Pestalozzi and Kristen Walker

PARTICIPANT INFORMED CONSENT FORM
[Date and/or version number]

Please read the following material that explains this research study. Signing this form will indicate that you have been informed about the study and that you want to participate. We want you to understand what you are being asked to do and what risks and benefits—if any—are associated with the study. This should help you decide whether or not you want to participate in the study.

You are being asked to take part in a research project conducted by Tehani Pestalozzi and Kristen Walker, undergraduate students in the University of Colorado at Boulder's Department of Arts and Sciences, [campus box number] UCB, Boulder, CO 80309-[box number]. This project is being done under the direction of Professor Moddel, Department of Electrical & Computer Engineering, 425 UCB. Tehani Pestalozzi can be reached at 303 442 2902. Kristen Walker can be reached at . Professor Moddel can be reached at 303 492-1889.

Project Description:

This research study is about whether or not there is a stronger telepathic connection. You are being asked to be in this study because [i.e., **provide a simplified description of your recruiting strategy**]. Participation in this study is entirely your choice.

Procedures:

If you agree to take part in this study, you will be asked to be a receiver and/or a sender. The receiver sits on one side of a concrete wall, while hooked up to a Galvanic Skin Response Machine, and guesses who is on the other side of it (i.e. either your spouse, a stranger or no one). The sender will be asked to stand on the other side of the concrete wall and think of the receiver for 30 seconds at random intervals. In between, he/she will be given an independent room in which he/she will be asked to focus on something else. Reading materials for this will be provided. At the end, we may ask you to do a short, filmed interview on any paranormal experiences you may have had with your partner. You may decline this step.

Participating should take at most, an hour and a half of your time. We will ask you to come to our lab in the Engineering Building on the CU Boulder campus to participate in this research.

You will be asked questions about your relationship (i.e. how long you've been married, if you have kids, etc.), your belief in psi phenomena, as well as if you have had any significant psi experiences.

A total of sixty people-- 20 couples and 20 "individual" participants will be invited to participate in this research study.

Risks and Discomforts:

There are no foreseeable physical or psychological risks associated with this study.

Benefits:

There are no direct benefits for you in taking part in this study. You will, however, receive a copy of the final article, as well as your individual scores. If we get enough filmed interviews of personal psi experiences, we will also provide you with a copy of them.

Study Withdrawal:

You have the right to withdraw your consent or stop participating at any time. You have the right to refuse to answer any question(s) or participate in any procedure for any reason.

Confidentiality:

We will make every effort to maintain the privacy of your data. We will not disclose any of your personal data to any third party, and will not mention any names or other distinguishable characteristics in any of our writings. If you are asked to be interviewed on film, you will be consenting to having your interview made public. You may, for any reason, refuse to be interviewed.

Other than the research team, only regulatory agencies such as the Office of Human Research Protections and the University of Colorado Human Research Committee may see your individual data as part of routine audits.

Invitation for Questions:

If you have questions about this study, you should ask the researcher before you sign this consent form.

If you have questions regarding your rights as a participant, any concerns regarding this project or any dissatisfaction with any aspect of this study, you may report them -- confidentially, if you wish -- to the Executive Secretary, Human Research Committee, 26 UCB, Regent Administrative Center 308, University of Colorado at Boulder, Boulder, CO 80309-0026 or by telephone to (303) 492-7401.

Authorization:

I have read this paper about the study or it was read to me. I know the possible risks and benefits. I know that being in this study is voluntary. I choose to be in this study. I know that I can withdraw at any time. I have received, on the date signed, a copy of this document containing 3 pages.

Name of Participant (printed) _____

Signature of Participant _____ Date _____
(Also initial all previous pages of the consent form.)

For HRC Use Only
This consent form is approved for use from _____ through _____.
_____ Panel Coordinator or Executive Secretary, Human Research Committee (Signature)